SEC 1972 (6-02)

## ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption state exemption unless such exemption is predicated on the filing of a federal notice.

UNITED STATES SECURITIES AND EXCHANGE COMMISSION Washington, D.C. 20549

FORM D

DEC 0 8 2003

NOTICE OF SALE OF SECURITIES
PURSUANT TO REGULATION D,
SECTION 4(6), AND/OR
UNIFORM LIMITED OFFERING EXEMPTION

OMB APPROVAL
OMB Number: 3235-0076
Expires: May 31, 2005
Estimated average burden hours per response... 1

SEC USE ONLY
Prefix Serial

DATE RECEIVED

| Name of Offering ([] check if this                               | is an amend                                         | ment and name h     | as changed, and    | indicate change.)                   |                                        |          |                    |
|------------------------------------------------------------------|-----------------------------------------------------|---------------------|--------------------|-------------------------------------|----------------------------------------|----------|--------------------|
| KIK Finance LLC Offering of G                                    | uarantee                                            |                     |                    |                                     | ······································ |          |                    |
| Filing Under (Check box(es) that                                 | apply):                                             | [] <u>Rule 504</u>  | [] <u>Rule 505</u> | [X] Rule 506                        | [ ] Section 4(6)                       | [] UL    | .OE                |
| Type of Filing: [X] New Filing                                   | [ ] Amendm                                          | ent                 |                    |                                     |                                        |          |                    |
|                                                                  |                                                     |                     |                    |                                     |                                        |          |                    |
|                                                                  |                                                     | А. В                | ASIC IDENTIFIC     | ATION DATA                          |                                        |          |                    |
| 1. Enter the information requested                               | d about the is                                      | ssuer               |                    |                                     |                                        |          | 9924               |
| Name of Issuer ([ ] check if this KIK Finance LLC                | is an amendr                                        | nent and name ha    | is changed, and i  | indicate change.)                   |                                        | 0303     | JJ27               |
| Address of Executive Offices (N 33 MacIntosh Boulevard, Conc     |                                                     |                     |                    |                                     | cluding Area Code)                     |          |                    |
| Address of Principal Business Op<br>Executive Offices)           | perations (Nu                                       | ımber and Street,   | City, State, Zip C | Code) Telephone N                   | lumber (Including Are                  | ea Code) | (if different from |
| Brief Description of Business<br>Producer of private label house | ehold bleach                                        | and other house     | ehold cleaning a   | and laundry prod                    | ucts.                                  |          |                    |
| Type of Business Organization                                    |                                                     |                     |                    |                                     |                                        | /        |                    |
| [ ] corporation                                                  | corporation [ ] limited partnership, already formed |                     |                    |                                     | (please specify): lim                  | nited )  | DEC 09 2003        |
| [ ] business trust                                               | [ ] limi                                            | ted partnership, to | be formed          |                                     | liability con                          | npany    | THOMSON            |
|                                                                  |                                                     |                     | Mon                | th Year                             |                                        |          |                    |
| Actual or Estimated Date of Incor                                | poration or C                                       | rganization:        | 3 ][ 0 ]           | 3] [9][8]                           | [x] Actual [] Es                       | timated  |                    |
| Jurisdiction of Incorporation or Or                              | •                                                   |                     |                    | e abbreviation for Sisdiction) [D][ |                                        |          |                    |

Bh

## **GENERAL INSTRUCTIONS**

#### Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6).

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

#### State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix in the notice constitutes a part of this notice and must be completed.

## A. BASIC IDENTIFICATION DATA

# 2. Enter the information requested for the following:

- Each promoter of the issuer, if the issuer has been organized within the past five years;
- Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer;
- Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and
- Each general and managing partner of partnership issuers.

| Check Box(es) that Apply:                              | [] Promoter     | [x] Beneficial Owner       | r []                                    | Executive Officer | []  | Director  | [x]                      | General and/or<br>Managing Partner |
|--------------------------------------------------------|-----------------|----------------------------|-----------------------------------------|-------------------|-----|-----------|--------------------------|------------------------------------|
| Full Name (Last name first, KIK Nova Scotia ULC        | if individual)  |                            |                                         |                   |     |           |                          |                                    |
| Business or Residence Add<br>33 MacIntosh Boulevard, ( |                 |                            | p Cod                                   | e)                |     |           |                          |                                    |
| Check Box(es) that Apply:                              | [] Promoter     | [ ] Beneficial Owner       | [x]                                     | Executive Officer | [ x | ] Directo | r []                     | General and/or<br>Managing Partner |
| Full Name (Last name first, Cynamon, David             | if individual)  |                            |                                         |                   |     |           |                          |                                    |
| Business or Residence Add c/o KIK Nova Scotia ULC,     |                 |                            |                                         |                   | ;   |           |                          |                                    |
| Check Box(es) that Apply:                              | [] Promoter     | [ ] Beneficial Owner       | [x]                                     | Executive Officer | []  | Director  | []                       | General and/or<br>Managing Partner |
| Full Name (Last name first, Brodie, Howard             | if individual)  |                            |                                         |                   |     |           |                          |                                    |
| Business or Residence Add c/o KIK Nova Scotia ULC,     |                 |                            |                                         |                   |     |           |                          |                                    |
| Check Box(es) that Apply:                              | [] Promoter     | [ ] Beneficial Owner       | [x]                                     | Executive Officer | []  | Director  | []                       | General and/or<br>Managing Partner |
| Full Name (Last name first, Pearce, Roy                | if individual)  |                            | *************************************** |                   |     |           | ************************ |                                    |
| Business or Residence Add c/o KIK Nova Scotia ULC,     |                 |                            |                                         |                   |     |           |                          |                                    |
| Check Box(es) that Apply:                              | [] Promoter     | [ ] Beneficial Owner       | []                                      | Executive Officer | []  | Director  | []                       | General and/or<br>Managing Partner |
| Full Name (Last name first,                            | if individual)  |                            |                                         |                   |     |           |                          |                                    |
| Business or Residence Add                              | ress (Number an | d Street, City, State, Zip | o Cod                                   | e)                |     |           |                          |                                    |

|                                                                                                       |                                           |                                         |                                        |                                             | E                                         | B. INFORM                                 | ATION A                    | BOUT OFF                               | ERING                                                      |                              |                          |              |
|-------------------------------------------------------------------------------------------------------|-------------------------------------------|-----------------------------------------|----------------------------------------|---------------------------------------------|-------------------------------------------|-------------------------------------------|----------------------------|----------------------------------------|------------------------------------------------------------|------------------------------|--------------------------|--------------|
| Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering? |                                           |                                         |                                        |                                             |                                           |                                           |                            |                                        |                                                            | Yes No                       |                          |              |
| Answer also in Appendix, Column 2, if filing under ULOE.                                              |                                           |                                         |                                        |                                             |                                           |                                           |                            |                                        | t 1 t~1                                                    |                              |                          |              |
| What is the minimum investment that will be accepted from any individual?                             |                                           |                                         |                                        |                                             |                                           |                                           |                            |                                        | N/A                                                        |                              |                          |              |
| 3. Does the offering permit joint ownership of a single unit?                                         |                                           |                                         |                                        |                                             |                                           |                                           |                            |                                        | Yes No                                                     |                              |                          |              |
| commi<br>person<br>states,                                                                            | ssion or si<br>to be liste<br>list the na | imilar remied is an as<br>ame of the    | uneration f<br>sociated p<br>broker or | for solicita<br>person or a<br>dealer. If r | tion of pure<br>agent of a l<br>nore than | chasers in<br>proker or d<br>five (5) per | connection<br>lealer regis | with sales<br>tered with<br>listed are | , directly or<br>of securition<br>the SEC ar<br>associated | es in the of<br>id/or with a | ffering, If a a state or | [ ] [x]      |
|                                                                                                       | me (Last i                                | name first                              | , if individu                          | ıal)                                        |                                           |                                           |                            |                                        |                                                            |                              |                          |              |
|                                                                                                       |                                           |                                         |                                        |                                             | <u> </u>                                  | - O/ =-                                   |                            |                                        |                                                            |                              |                          |              |
| 3usine<br>3 <mark>00 M</mark> a                                                                       | ss or Resi<br>adison Av                   | iaence Adi<br>r <mark>enue, 28</mark> t | aress (Nur<br><sup>h</sup> Floor, N    | nber and i<br>ew York,                      | Street, City<br>NY 10017                  | , State, Zi                               | p Code)                    |                                        |                                                            |                              |                          |              |
|                                                                                                       |                                           | ited Broke<br>tners, LL                 | r or Deale:<br>C                       | •                                           |                                           |                                           |                            |                                        |                                                            |                              |                          |              |
|                                                                                                       |                                           |                                         |                                        |                                             | Intends to                                |                                           | rchasers                   |                                        |                                                            | _                            |                          |              |
|                                                                                                       |                                           |                                         |                                        | •                                           |                                           |                                           |                            |                                        |                                                            | -                            | ] All States             |              |
| AL]                                                                                                   | [AK]                                      | [AZ]                                    | [AR]                                   | [CA]                                        | [CO]                                      | [CT]                                      | [DE]                       | [DC]                                   | [FL]                                                       | [GA]                         | [HI]                     | [ID]         |
| L]<br>MT]                                                                                             | (IN)<br>[NE]                              | [IA]<br>[NV]                            | [KS]<br>[NH]                           | [KY]<br>[NJ]                                | [LA]<br>[NM]                              | [ME]<br>[NY]                              | [MD]<br>[NC]               | [MA]<br>[ND]                           | [MI]<br>[OH]                                               | [MN]<br>[OK]                 | [MS]<br>[OR]             | [MO]<br>[PA] |
| RI]                                                                                                   | [SC]                                      | [SD]                                    | [TN]                                   | [TX]                                        |                                           | [VT]                                      | [VA]                       | [WA]                                   | [WV]                                                       | [WI]                         | [WY]                     | (PR)         |
|                                                                                                       | me (Last i                                | name first,                             | , if individu                          | al)                                         |                                           |                                           |                            |                                        |                                                            |                              |                          |              |
| Busine                                                                                                | ss or Resi                                | dence Addrenue, 28 <sup>th</sup>        | dress (Nur                             | mber and s                                  | Street, City                              | , State, Zi                               | c Code)                    |                                        |                                                            |                              |                          |              |
|                                                                                                       |                                           | ited Broke<br>tners, LL                 | r or Dealei<br>C                       | r                                           |                                           |                                           |                            |                                        |                                                            |                              |                          |              |
|                                                                                                       |                                           |                                         |                                        |                                             | Intends to                                |                                           | chasers                    |                                        |                                                            | [ x ]                        | ] All States             |              |
| AL]                                                                                                   | [AK]                                      | [AZ]                                    | [AR]                                   | [CA]                                        | [CO]                                      | [CT]                                      | [DE]                       | [DC]                                   | [FL]                                                       | [GA]                         | [HI]                     | [ID]         |
| L]                                                                                                    | [IN]                                      | [IA]                                    | [KS]                                   | [KY]                                        | [LA]                                      | [ME]                                      | [MD]                       | [MA]                                   | [MI]                                                       | [MN]                         | [MS]                     | [MO]         |
| MT]                                                                                                   | [NE]                                      | [NV]                                    | [NH]                                   | [NJ]                                        | [NM]                                      | [NY]                                      | [NC]                       | [ND]                                   | [OH]                                                       | [OK]                         | [OR]                     | [PA]         |
| RI]                                                                                                   | [SC]                                      | [SD]                                    | [TN]                                   | [TX]                                        | [UT]                                      | [VT]                                      | [VA]                       | [WA]                                   | [WV]                                                       | [WI]                         | [WY]                     | [PR]         |

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

# C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

1. Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero." If the transaction is an exchange offering, check this box " and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.

| Type of Security                                                                                                                                                                                                                                                                                                                                                                         | Aggregate<br>Offering<br>Price | Amount<br>Aiready<br>Sold           |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------|-------------------------------------|
| Debt                                                                                                                                                                                                                                                                                                                                                                                     | \$ 0                           | \$ 0                                |
| Equity                                                                                                                                                                                                                                                                                                                                                                                   | \$ 0                           | \$ 0                                |
| [ ] Common [ ] Preferred                                                                                                                                                                                                                                                                                                                                                                 |                                | * *                                 |
| Convertible Securities (including warrants)                                                                                                                                                                                                                                                                                                                                              | \$ 0                           | \$ 0                                |
| Partnership Interests                                                                                                                                                                                                                                                                                                                                                                    | \$ 0                           | \$ 0                                |
| Other (Specify) guarantee                                                                                                                                                                                                                                                                                                                                                                | \$ 0                           | \$ 0                                |
| Total                                                                                                                                                                                                                                                                                                                                                                                    | \$ 0                           | \$ 0                                |
| Answer also in Appendix, Column 3, if filing under ULOE.                                                                                                                                                                                                                                                                                                                                 | <b>.</b>                       | * -                                 |
| 2. Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."            |                                | Aggregate                           |
| Accredited Investors                                                                                                                                                                                                                                                                                                                                                                     | Number<br>Investors<br>8       | Dollar<br>Amount<br>of<br>Purchases |
| Non-accredited Investors                                                                                                                                                                                                                                                                                                                                                                 | 0                              | \$ 0                                |
| Total (for filings under Rule 504 only)                                                                                                                                                                                                                                                                                                                                                  | -                              | -                                   |
| Answer also in Appendix, Column 4, if filing under ULOE.                                                                                                                                                                                                                                                                                                                                 |                                | -                                   |
| by the issuer, to date, in offerings of the types indicated, the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1.                                                                                                                                                                                     |                                |                                     |
|                                                                                                                                                                                                                                                                                                                                                                                          | Type of                        | Dollar<br>Amount                    |
| Type of offering                                                                                                                                                                                                                                                                                                                                                                         | Security                       | Sold                                |
| Rule 505                                                                                                                                                                                                                                                                                                                                                                                 | -                              | •                                   |
| Regulation A                                                                                                                                                                                                                                                                                                                                                                             | -                              | -                                   |
| Rule 504                                                                                                                                                                                                                                                                                                                                                                                 |                                | -                                   |
| Total                                                                                                                                                                                                                                                                                                                                                                                    | -                              | •                                   |
| 4. a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate. | <b>;</b>                       |                                     |
| Transfer Agent's Fees                                                                                                                                                                                                                                                                                                                                                                    |                                | [] \$0                              |
| Printing and Engraving Costs                                                                                                                                                                                                                                                                                                                                                             |                                | [] \$0                              |
| Legal Fees                                                                                                                                                                                                                                                                                                                                                                               |                                | [] \$0                              |
| Accounting Fees                                                                                                                                                                                                                                                                                                                                                                          |                                | [] \$0                              |
| Engineering Fees                                                                                                                                                                                                                                                                                                                                                                         |                                | [] \$0                              |
| Sales Commissions (specify finders' fees separately)                                                                                                                                                                                                                                                                                                                                     |                                | [] \$0                              |
| Other Expenses (identify)                                                                                                                                                                                                                                                                                                                                                                |                                | [] \$0                              |
| Total                                                                                                                                                                                                                                                                                                                                                                                    |                                | [] *\$0                             |
| *Expenses related to the transaction to be borne by KIK Holdco Company.                                                                                                                                                                                                                                                                                                                  |                                |                                     |

b. Enter the difference between the aggregate offering price given in response to Part C - Question 1 and total expenses furnished in response to Part C - Question 4.a. This difference is the "adjusted gross proceeds to the issuer."

\$0

Daymente to

5. Indicate below the amount of the adjusted gross proceeds to the Issuer used or proposed to be used for each of the purposes shown. If the amount for any purpose is not known, furnish an estimate and check the box to the left of the estimate. The total of the payments listed must equal the adjusted gross proceeds to the issuer set forth in response to Part C - Question 4.b above.

|                                                                                                                                                                                                | Officers, Directors, & Affiliates | Payments To<br>Others |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------|-----------------------|
| Salaries and fees                                                                                                                                                                              | []\$ <u>o</u>                     | []\$ <u>0</u>         |
| Purchase of rezi estate                                                                                                                                                                        | []\$ <u>0</u>                     | []\$0                 |
| Purchase, rental or leasing and Installation of machinery and equipment                                                                                                                        | []\$ <u>0</u>                     | []\$0                 |
| Construction or leasing of plant buildings and facilities                                                                                                                                      | []\$0                             | []\$ <u>0</u>         |
| Acquisition of other businesses (including the value of securities involved in this offering that may be used in exchange for the assets or securities of another issuer pursuant to a merger) | {]\$ <u>0</u>                     | (]\$ <u>0</u>         |
| Repayment of indebtedness                                                                                                                                                                      | []\$ <u>0</u>                     | []\$0                 |
| Working capital                                                                                                                                                                                | []\$ <u>0</u>                     | {}\$ <u>0</u>         |
| Other (specify):                                                                                                                                                                               | []\$9                             | []\$ <u>0</u>         |
| Column Totals                                                                                                                                                                                  | []\$ <u>0</u>                     | []\$ <u>0</u>         |

#### D. FEDERAL SIGNATURE

The issuer has duly caused this notice to be signed by the undersigned duly authorized person. If this notice is filed under <u>Rule 505</u>, the following signature constitutes an undertaking by the issuer to furnish to the U.S. Securities and Exchange Commission, upon written request of its staff, the Information furnished by the issuer to any non-accredited Investor pursuant to paragraph (b)(2) of <u>Rule 502</u>.

|                                | Signature<br>By: KIK Nova Scotia Company ULC, | Date              |
|--------------------------------|-----------------------------------------------|-------------------|
| KIK Finance LLC                |                                               | December 2 , 2003 |
| Name of Signer (Print or Type) | Title of Signer Print or Type)                |                   |
| Roy Pearce                     | Chief Financial Officer                       |                   |

|                                                                                                              | _ |
|--------------------------------------------------------------------------------------------------------------|---|
| ATTENTION                                                                                                    |   |
|                                                                                                              |   |
| Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.) |   |